## LPA PROJECT CONTRACT REQUEST INFORMATION

**EDS** #: \_\_\_\_\_

•	Name and address of LPA:		
•	Title and Address of INDOT Project Manag	er:	
•	Project Description:  O Des. Number:  O Type of Project:  O Location:  O Further Description:		
•	Term of Contract:  o Desired Start Date: o Approved Project Letting Fiscal Year:		
•	Funding TIP/STIP approval amount and date:		
	OVERALL:		
	<ul> <li>Estimated total project costs: \$</li> <li>Approved maximum federal aid contribution</li> <li>Federal aid percentage: %</li> <li>Estimated local match contribution: \$</li> <li>Estimated local supplemental funding: \$</li> </ul>	on: \$	
<u>P.E.</u> ●	Estimated Costs: \$		
	<ul><li> Is direct federal funding to be used?</li><li> Will match credit be used?</li><li> Paid 100% local funds?</li></ul>	Y Y Y	N N N
<u>R/W</u>	Estimated Costs: \$		
	<ul><li> Is direct federal funding to be used?</li><li> Will match credit be used?</li><li> Paid 100% local funds?</li></ul>	Y Y Y	N N N

Construc	tion Engineering (C.E.)		
•	Estimated Costs: \$ o Is direct federal funding to be used? o Paid 100% local funds?	Y Y	N N
Construc	<u>tion</u>		
•	Estimated Construction Costs: \$ Utility Cost: \$ Railroad Cost: \$ O Is direct federal funding to be used? O Paid 100% local funds:	Y Y	N N
•	<b>Special Conditions of this Contract:</b>		
	o LPA Responsibilities		
	1.		
	2.		
	o INDOT Responsibilities		
	1.		

2.

## **Local Signatories**

\*Name: \*Name: \*Name: \*Title: \*Title:

<sup>\*</sup> Please attach FA3 Form